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AME	TTER	Docket No. 104640-0021-101				
Application No. Filing Date Exam					Art Unit	
10/644,350 Aug			0, 2003	A. Q. Huerta	a 4115	
Applicant(s): Rus	sel McDonald				AND	
	ODS AND APP CTING DUPLIC			IG PROGRAM SEG	MENTS BY	
		THE COMMI				
Transmitted here						
The fee has beer	n calculated and					
	Claims	Highest	S AS AMENI	DED		
	Remaining After Amendment	Number Previously Paid	Number Extra Claims Present	Rate		
Total Claims	24	- 20 =	4	x 25.00	100.00	
Independent Claims	3	- 4 =		х		
Multiple Depend	lent Claims (ch	eck if applicabl	e)			
Other fee (please specify): Extension for response within third month 525.00						
TOTAL ADDIT	IONAL FEE FO	OR THIS AME	NDMENT:		625.00	
Large Entity				x Small Entity		
No additiona	al fee is require	d for this amer	ndment.			
X Please char	ge Deposit Acc			n the amount of \$ _	625.00	
A check in the	ne amount of \$		to cover	the filing fee is enclo	osed.	
Payment by	credit card. Fo	orm PTO-2038	is attached.			
	r is hereby auth d below. A dup			Deposit Account No enclosed.	18-1945	
	ny overpaymer					
x Charge	any additional fil	ing or application	on processing	fees required under 3	7 CFR 1.16 and 1.17.	
/Haixia Lin/				Dated:	April 21, 2008	
Haixia Lin Attorney/Agent	Reg. No.: 61,	318				
ROPES & GRA						
Boston, Massa (617) 951-7234	chusetts 0211	0				
I hereby certify that this the date shown below w Box 1450, Alexandria, V	rith sufficient postage	y paper referred to a as First Class Mail,	s being attached o in an envelope add	r enclosed) is being deposited dressed to: MS Amendment,	d with the U.S. Postal Service of Commissioner for Patents, P.O.	

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PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032

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Effective on 12/08/2004.			<u> </u>	Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			818). A	Application Number 10/644,350				
FEE TRANSMITTAL						August 20, 20		
For FY 2008				First Named Inventor Russel McDonald			nald	
FOF F 1 2006			┸	Examiner Name A. Q. Huerta				
X Applicant claims small entity status. See 37 CFR 1.27				Art Unit 4115				
TOTAL AMOUNT OF PAYMENT (\$) 625.00			A	Attomey Docket No. 104640-0021-101				
METHOD OF	PAYMENT (check	all that apply)						
Check	Credit Card	Money Order	None	Other	(please identif	y):		
X Deposit Ac	count Deposit Account	Number: 18-19	945	Deposit	Account Name	Rope	s & Gray L	LP
For the	above-identified depo	osit account, the Dire	ctor is h	ereby authorize	ed to: (chec	k all that apply)		
	harge fee(s) indicated					licated below, e		ne filing fee
× C	harge any additional i	fee(s) or underpayme	ents of	x Credit	any overpa	ayments		
FEE CALCU								
1. BASIC FILIN	G, SEARCH, AND E							
	FI	LING FEES	SEAF	RCH FEES	EXAMIN	IATION FEES Small Entity	ì	
Application T	ype <u>Fee (</u> \$	Small Entity) Fee (\$) F	ee (\$)	Small Entity Fee (\$)	Fee (\$)	Fee (\$)	Fees F	Paid (\$)
Utility	310	155	510	255	210	105		
Design	210	105	100	50	130	65		
Plant	210	105	310	155	160	80		
Reissue	310	155	510	255	620	310		
Provisional	210	105	0	0	0	0		
2. EXCESS CL	AIM FEES							Small Entity Fee (\$)
Fee Description							Fee (\$) 50	25
	r 20 (including Reiss ent claim over 3 (incl						210	105
Multiple depen	·	duling Reissues)					370	185
Total Claims	Extra Claims	Fee (\$)	Fee Pai	id (\$)	Mı	ultiple Depende	ent Claims	
		x 25.00 =	100.	00	Fe	e (\$)	Fee Paid (\$)
HP = highest num	nber of total claims paid for	r, if greater than 20.						_
Indep. Claims	Extra Claims	Fee (\$)	Fee Pai	id (\$)				
HP = highest num	- 3 =nber of independent claims	paid for, if greater than 3	·.					
3. APPLICATION	•							
If the specific	ation and drawings ender 37 CFR 1.52(e)), raction thereof. See 3	the application size i	fee due i	is \$260 (\$130	for small ei	led sequence or ntity) for each a	computer idditional 5	0
Total Shee	ts Extra Sheet	s <u>Number of c</u>	each add	litional 50 or fra	ction thereo		Fee	Paid (\$)
	100 =	/50 =	(r	ound up to a wh	ole number)	х	=	Paid (\$)
4. OTHER FEE	(S) 1 Specification, \$13	0 fee (no small entity	v discou	nt)			rees	Paid (\$)
	late filing surcharge)				hird month)	52	25.00
SUBMITTED BY								
Signature	/Haixia Lin/			egistration No. attorney/Agent)	61,318	Telephone	(617) 95	1-7234
Name (Print/Type)	Haixia Lin		10.			Date	April 21	, 2008
	<u></u>					_ 		

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71 0 1 0 0	Signature: Ways Vn wwo (Mary Murphy)
	Signature: V V QU V V (Mary Murphy)
Dated: 1 2 1 0 0	Signature: V 1 QUO / 1 V 1 (100 V V 1 (Wally Wallprily)